NMOCD - Hobbs

Form 3160-5
(June 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

5. Lease Designation and Serial No.
LC 031621A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

1. Type of Well
☐ Oil Well ☒ Gas Well ☐ Other

8. Well Name and No. BRITT # 1

2. Name of Operator
MERIDIAN OIL INC.

9. API Well No.
30-025-05972

3. Address and Telephone No.
P.O. Box 51810 Midland, TX 79710 915-688-6943

10. Field and Pool, or Exploratory Area
EUMONT YTS 7RVR QN

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
SEC. 7, T20S, R37E
1980' FNL & 1980' FWL
Unit F

11. County or Parish, State
LEA COUNTY, NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION	
☐ Notice of Intent	☐ Abandonment	☐ Change of Plans
☒ Subsequent Report	☐ Recompletion	☐ New Construction
☐ Final Abandonment Notice	☐ Plugging Back	☐ Non-Routine Fracturing
	☐ Casing Repair	☐ Water Shut-Off
	☐ Altering Casing	☐ Conversion to Injection
	☒ Other CHANGE OF OPERATOR R	☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*
CHANGE OF OPERATOR. DOYLE HARTMAN - PREVIOUS OPERATOR. SOLD TO MERIDIAN OIL INC..
EFFECTIVE 9/1/91.

OCT 12 10 52 AM '93
RECEIVED

OCT 25 1993
CARLSBAD, NEW MEXICO

14. I hereby certify that the foregoing is true and correct
Signed DONNA WILLIAMS Title PRODUCTION ASSISTANT Date 10/5/93

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.